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# Are Gender Differences in Bystander Intent to Help a Potential Victim of Party Rape Mediated By Barriers to Help, Rape Myth Acceptance, or Both?

Leyna Johnson

## ABSTRACT

This study investigates the individual differences in bystander intent to help a potential victim of party rape. The potential victim was described as an intoxicated woman who was escorted by an apparently sober man into a back bedroom. Undergraduate students at a small liberal arts college (N = 209, 76.1% women) read the description and responded to measures of intent to help, barriers to helping, and rape myth acceptance. As expected, intent to help correlated negatively with barriers to helping and rape myth acceptance. Also as expected, men reported less intent to help, perceived more barriers to helping, and accepted more rape myths than women. Multivariate analyses showed that the gender difference in intent to help was mediated by barriers to helping but not rape myth acceptance. Bystander education programs that explicitly address barriers to helping, including skills deficits and audience inhibition, may be more effective in engaging bystanders to prevent sexual assault.

Campus sexual assault is a common problem in the United States. Krebs, Lindquist, Warner, Fischer, and Martin (2007) found that 19% of college women experience completed or attempted sexual assault; cases define sexual assault as forced touching of a sexual nature, oral sex, sexual intercourse, anal sex, and/or sexual penetration with a finger or object. Party rape is a form of sexual assault that takes place either on or off campus; it typically involves plying the victim with alcoholic beverages to obtain sexual access (Armstrong, Hamilton, & Sweeney, 2006). Twenty percent of college women experience rape, and 72% of the rapes that occurred were attributed to alcohol intoxication (Mohler-Kuo, Dowdall, Koss, & Wechsler, 2004). A common occurrence on college campuses are pre-assault risks. Pre-assault risks are factors that can contribute to an increased likelihood of being a victim of sexual assault. These factors include being female and alone at a party, being female and with friends (male or female) at a party, intoxication of victim or perpetrator, being in a secluded or dark area, and males exhibiting "pre-rape behaviors" (Rozee & Koss, 2001, p. 299).

Pre-rape behaviors include attitudes of sexual entitlement, exhibition of power and control, hostility, anger, and acceptance of interpersonal violence (Rozee & Koss, 2001).

Currently, campus sexual assault is being addressed by bystander educational programs that aim to prevent party rape and other forms of rape. A bystander is a witness to an emergency, crime, or other dangerous situations, but is not directly involved like a victim or perpetrator (Banyard & Moynihan, 2011). Bystander education is the approach to preventing campus sexual assault. By letting the community attempt to intervene and prevent situations within which a party rape might occur, the focus away from victims and perpetrators and encourages individuals in the community to take action (McMahon, 2010). The reduction of bystander inhibition is a major goal of bystander education programs.

Bystander inhibition can be experienced in multiple ways and at various stages of risk awareness. Intervention barriers are internal thoughts or beliefs that



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prevent a bystander from taking action to prevent party rape. Latané and Darley outlined five steps that need to be taken for a bystander to intervene (as cited in Burn, 2009). Each step has a separate but related barrier; the first step is to notice the event, the second step is to identify the event as intervention-appropriate, the third step is to take responsibility, the fourth step is to decide how to help, and the fifth step is to act to intervene. Burn (2009) found that individuals who experienced greater barriers to helping offered less help in situations of possible party rape within a hypothetical survey. In another hypothetical survey by Bennett, Banyard, and Garnhart (2014), failure to take responsibility and inadequate skills were the most prevalent barriers tied to sexual assault situations. It may be expected that bystanders who experience more barriers will help to female victims of party rape.

Although many situational factors have potential to influence barriers in bystander-helping behavior, personal attitudes on the part of the bystander could also inhibit the act of helping. Rape myths are defined as a complex set of cultural beliefs that lead to the perpetuation of male sexual violence against women (Payne, Lonsway, & Fitzgerald, 1999). Rape myths can affect the perspective of potential bystanders with regard to possibly risky situations, which can in turn affect bystander helping behavior. In a survey of attitudes towards sexual assault, McMahon (2010) found that individuals who accept rape myths more readily were less likely to intervene in potential rape situations than individuals with lower acceptance of rape myths. It may be expected that bystanders with higher rates of rape myth acceptance are less likely than bystanders with lower rates of rape myth acceptance to offer help to female victims of party rape.

Bystander inhibition may be affected by the social group of the victim in relation to the bystander. Social categorization theory suggests that individuals view others in their social group (in-group) more favorably than those outside their social group (out-group). Although social groups tend to have negative associations such as diffusion of responsibility, there are also positive associations such as social cohesion and co-operation (Turner, Hogg, Oakes, Reicher, & Wetherell, 1987). Consequently, maintaining a positive view of in group members could create a sense of duty in bystanders and influence them to intervene,

an act which would lower bystander inhibition rates. The Levine, Cassidy, Brazier, and Reicher (2002) study was an analogue study in which participants watched a video of a man being attacked. The participants were asked whether or not they would provide help to the man in question; fellow student participants in the same social category were more likely to offer help than participants who were not in the same social category.

Gender is a type of social group. Women may be less likely than men to participate in bystander inhibition and therefore more likely to offer help to a female student at risk for party rape due to their shared gender group. There are mixed results in the literature. The Banyard and Moynihan (2011) study was a retrospective study in which participants were asked about sexual assault in general; women bystanders were found to offer more help than men bystanders. In a longitudinal study of sexual assault attitudes, Banyard (2008) found that women were more likely than men to offer help in situations of sexual assault. However, in an analogue study conducted by Fischer, Greitemeyer, Pollozek, and Frey (2006), participants witnessed a woman being harassed by a physically threatening male or a non-physically threatening male and no gender difference in helping behavior was found. Another analogue study conducted by Levine et al. (2002) found no gender differences in bystander-helping behavior. The lack of gender difference in these two studies may be due to the fact that the studies were based upon physical assault rather than sexual assault.

Some research suggests that men would rather appear to be masculine to other men and the fear of appearing weak is the reason that men are less likely to help women in rape situations. (Carlson, 2008). An analogue study conducted by Tice and Baumeister (1985) found that when participants heard a potential choking victim, masculine individuals offered less help than other participants. In a hypothetical study where students in an introductory psychology class were asked to answer questions on sexual assault prevention attitudes, opinions, and behaviors, Burn (2009) found that men experience higher numbers of barriers (other than inhibition due to a skills deficit) as bystanders in a pre-assault stage than women. Men give less concrete intervention strategies than do women (Koelsch, Brown, & Boisen, 2012). Be-

cause men experience more inhibitions than women, women's offer of help to female victims should be higher. It may be expected that women bystanders are more likely than men bystanders to offer help to a female at risk for party rape.

However, gender differences in rape myth acceptance have been found more consistently. Eyssel, Bohner, and Siebler (2006) found that men who believe they're in a group that has higher rates of rape myth acceptance report higher amounts of rape proclivity. When men perceive their peers as accepting of rape myths, they are more inclined to perpetrate behaviors than intervene. Hinck and Thomas (1999) found that although college students tend to disagree with rape myths in general, men tend to disagree less with rape myths. McMahon (2010) found that men have greater rates of rape myth acceptance than women. A multicultural study found similar results in regards to gender, but determined that American students have higher rape myth acceptance than Scottish students (Muir & Payne, 1996); this difference could be due to American culture promoting higher rape myth acceptance. Further research is needed to understand gender differences in rape myth acceptance, especially in America.

The following study was conducted in order to investigate factors that influence bystander responses to risk for party rape. The first hypothesis stated that bystanders who experience greater barriers to helping will offer less help to victims at risk for party rape. This difference could be due to barriers causing bystander inhibition (Burn, 2009). The second hypothesis was that bystanders who have higher rates of rape myth acceptance will offer less help to victims at risk for party rape. This difference may be due to the acceptance of rape myths inhibiting bystander behavior (McMahon, 2010). The third hypothesis was that men bystanders will experience more barriers than women bystanders, based on research conducted by Burn (2009). The fourth hypothesis was that men bystanders may be more likely than women bystanders to accept rape myths. The fifth hypothesis was that men bystanders might be less likely than women bystanders to offer help to a female at risk for party rape and the sixth hypothesis was that these differences may be due to men experiencing more barriers to helping and accepting more rape myths than women. The current study adds to the literature by

building off past retrospective studies on rape myth acceptance and looking at bystander helping behavior offered in an analogue situation (McMahon, 2010). The current study also adds to the limited research on barriers by building off of Burn's (2009) study and by looking at an analogue situation to determine whether bystanders with higher barriers would offer less help.

## METHOD

### Participants

Data was collected from 209 undergraduates (76.1% female) at a small public college in Western N.Y. The mean age of participants was 19.20 ( $SD = 1.36$ ), and ranged from 17 to 26. Eighty-five students (40.7%) were freshman, 62 students (29.7%) were sophomores, 41 students (19.6%) were juniors, and 21 students (10.0%) were seniors. One hundred and seventy-two participants (82.3%) responded as White/Caucasian, 14 participants responded as Asian or Asian American (6.7%), 12 participants (5.7%) responded as Black/African American, 10 participants (4.8%) responded as Hispanic/Latino/Chicano, and one participant (0.5%) responded as Native American.

### Design

A multivariate correlational design was used within which one between-subjects variable (bystander gender; men and women) was compared to two different sets of dependent variable causes of bystander inhibition (rape myth acceptance and barriers to help) and intent to offer direct help.

### Measures

**Intent to help.** Six bystander helping responses were adapted from Chabot, Tracy, Manning, and Poisson (2009), as well as Levine and Crowther (2008) in the present study. Six direct helping methods (e.g., "ask the drunk girl if she is okay") were assessed to create a scale for direct help. A Likert-type scale was used to determine how likely it was that participants would enact a behavior (1 = *strongly disagree*, 7 = *strongly agree*). Scores were averaged; higher scores indicated greater intent to offer direct help. Reliability of this measure was demonstrated in past research by Katz,



Colbert, and Colangelo (2015). Internal consistency was found to be good in the present study ( $\alpha = .90$ ).

**Barriers to helping.** Nine questions with regards to four of the barriers to bystander intervention behavior were adapted from Burn (2009) in the present study. One item from the risk identification barrier was “stay out of it, given no one else seems concerned.” Five items were from the failure to take responsibility barrier which was “leave it up to others to get involved.” One item from the skills deficit barrier was “know what to say or do in this situation.” Two items from the audience inhibition barrier were “worry that if you got involved, you might look stupid” and “decide not to get involved because unsure if others will support you.” A Likert-type scale was used to determine how likely it was that participants would experience each barrier (1 = *definitely likely*, 7 = *definitely unlikely*). Scores were averaged and higher scores indicated greater experience of barriers. The author demonstrated the reliability of this measure. In the current study, the estimate of internal consistency was found to be good ( $\alpha = .85$ ).

**Rape myth acceptance.** The Illinois Rape Myth Acceptance Short Form (IRMA-SF) was designed to assess participant's agreement with various rape myths and was used in the current study (Payne et al., 1999). The IRMA-SF is composed of 17 items (e.g., “when women are raped, it's often because the way they said “no” was ambiguous”). A Likert-type scale was used to determine how likely participants were to accept rape myths (1 = *strongly disagree*, 5 = *strongly agree*). Scores were averaged with higher scores indicating greater acceptance of rape myths. The authors provided evidence for the reliability of this measure. Internal consistency in the present study was found to be good ( $\alpha = .86$ ).

## Procedure

From an online database provided by the psychology department studies, undergraduate students participated, voluntarily, in a study that dealt with *Attitudes and Reactions of Different Party Safety Messages and Situations*. All participants provided informed consent. Participants filled out surveys in classrooms on campus. Participants were instructed to imagine that they were at a party where they witnessed an intoxicated woman being led into a private bedroom by

a seemingly sober man. Participants answered their reaction to the event as well as some personal characteristics on a self-reported scale. Data collection sessions lasted for no longer than an hour. When participants completed their surveys they placed the papers in a slotted box. Participants received extra credit from class as compensation. Full disclosures were provided.

## Results

Overall, participants were somewhat likely to offer direct help to potential victims of party rape ( $M = 4.95$ ,  $SD = 1.58$ , ranging from 1 to 7). Participants experienced a moderate amount of barriers ( $M = 3.27$ ,  $SD = 1.21$ , ranging from 1 to 6.63). Rape myth acceptance was low ( $M = 1.62$ ,  $SD = 0.50$ , ranging from 1 to 3.18).

Hypothesis one was that participants who experienced higher numbers of barriers were less likely to provide direct help to a potential victim of party rape than participants who experienced lower numbers of barriers. A negative correlation was found between the number of barriers experienced and the amount of direct help offered to potential victims in the first hypothesis,  $r(207) = -.67$ ,  $p < .001$ . Similarly, hypothesis two stated that there would be a negative correlation between rape myth acceptance and direct help offered to potential victims,  $r(206) = -.21$ ,  $p < .01$ . Again, the second hypothesis was supported by the study.

Hypothesis three and four stated that there would be bystander gender differences in barriers to help as well as rape myth acceptance. Two independent sample t-tests were conducted to examine gender differences in barriers to helping and rape myth acceptance. There also was a significant between-groups difference in barriers,  $t(206) = -2.63$ ,  $p < .009$ . As expected, men bystanders were significantly more likely to experience barriers ( $M = 3.66$ ,  $SD = 1.14$ ) than women bystanders ( $M = 3.15$ ,  $SD = 1.21$ ). Hypothesis three was supported. There was a significant, between-groups, difference in rape myth acceptance,  $t(64.21) = -4.61$ ,  $p < .001$ . As expected, men bystanders were more likely to accept rape myths ( $M = 1.94$ ,  $SD = 0.60$ ) than women bystanders ( $M = 1.52$ ,  $SD = 0.41$ ). The fourth hypothesis was supported.

Regression analyses were conducted to examine whether barriers to helping and rape myth acceptance might account for expected gender differences in helping. In the first regression, the gender of the bystander predicted direct help ( $\beta = .15, p < .05$ ); full model  $F(1, 205) = 4.77, p < .05$ . This suggested significant gender differences in direct helping behavior, supporting hypothesis 5. In a second regression, barriers to help ( $\beta = -.65, p < .001$ ) and rape myth acceptance ( $\beta = -.06, ns$ ) were added to the model,  $F(3, 203) = 54.08, p < .001$ . The significant  $\beta$ , for barriers to help but not rape myth acceptance, suggests that barriers to help explain gender differences more accurately because bystander gender was no longer a significant predictor in the second model ( $\beta = .01, ns$ ). The sixth hypothesis was partially supported.

## DISCUSSION

The purpose of this study was to investigate factors that influence bystander helping behavior in order to help prevent potential party rape. As expected, bystanders who reported more barriers and higher rates of rape myth acceptance were less likely to offer direct help to a potential victim at risk for party rape than bystanders with lower numbers of barriers and rates of rape myth acceptance. Also as expected, men reported more barriers and higher rates of rape myth acceptance than women. Finally, as expected, men bystanders were less likely to offer help than women bystanders; this gender difference was found to result from barriers to help rather than rape myth acceptance.

The presented study found that, generally, bystanders who have more barriers offer less help than bystanders who have fewer barriers. This finding was similar to Burn's (2009) research, and expands on this research by looking at barriers experienced by bystanders within an analogue situation of party rape. The present study also found that bystanders who accept higher numbers of rape myths offer less direct help than bystanders who accept fewer rape myths. The current results were similar to McMahon's (2010) older results and builds off this research by looking at situations of party rape instead of sexual assault in general, and by using an analogue design as opposed to a retrospective design.

The present study found that men bystanders experienced more barriers to help than women bystanders. The current findings were, again, similar to findings from Burn (2009). The present study found that men bystanders accept more rape myths than women bystanders. The current findings were similar to past results (Muir & Payne, 1996; McMahon, 2010). The present study replicates past findings of gender differences in barriers to help and rape myth acceptance.

The current study found that men bystanders offer less help to potential victims of party rape than women bystanders. The present findings were similar to Banyard (2008) and Levine and Crowther (2008), but differ from Fischer et al. (2006). The current study extends Banyard's (2008) study of sexual assault attitudes by specifically looking at situations of party rape in an analogue design instead of a longitudinal design. The present paper also builds off Levine and Crowther's (2008) study by looking at female victims of potential party rape, not physical violence. In an unambiguous situation of harassment, Fischer et al.'s (2006) study showed no gender differences in helping behavior, but the current study found that gender differences affect helping behavior in an ambiguous situation of party rape.

The present study found that gender differences in bystander help could be attributed to barriers to helping but not rape myth acceptance. Banyard (2008) found that there are gender differences in bystander helping in situations of sexual assault but no potential explanations were explored. The current study expands on Banyard's (2008) study by exploring possible explanations of gender differences in bystander help. Consistent with Burn (2009), the present study found that the more barriers to help that bystanders were presented with, the less likely they were to offer direct help to potential victims of party rape, and that men bystanders experienced more barriers to help than women bystanders. The present study extended past research by showing that gender differences in barriers to help could account for gender differences in direct helping behavior. In contrast to past research, the current study found that to the degree that bystanders accepted more rape myths, they offered less direct help to potential victims of party rape, and rape myth acceptance was higher in men bystanders than women bystanders. However, rape myth acceptance did not explain the gender differ-

ences in bystander help offered to potential victims of party rape beyond the direct effect of barriers. Rape myth acceptance could be related to barriers to helping, as shown by a secondary analysis,  $r(206) = .22$ ,  $p < .001$ , which suggests that rape myth acceptance may affect barriers, and barriers, in turn, explain gender differences in helping behavior. The current study does not explain gender differences in helping as they pertain to rape myth acceptance beyond barriers to help.

Despite the significant findings of the current study, there were limitations. Some limitations to the current study involved participant variability (or lack of), only female victims being represented, and only two possible explanatory factors of bystander inhibition. Most of the participants in the present study were women, and the underrepresentation of men could misrepresent the actual helping behavior in the general population. Multiple studies have found no gender differences in helping behavior (Fischer et al., 2006; Banyard & Moynihan, 2011). Participants predominantly identified as Caucasian in the present study. Although it has been found that party rape is a problem typically associated with individuals who identify as white (Armstrong et al., 2006), having the perspective of a more well-rounded sample might generalize better. The present study only looked at the differences of gender, barriers to help, and rape myth acceptance, when other possible sources of bystander inhibition exist, such as victim blame or empathy, and social status of the victim in relation to the bystander.

The current study found that gender differences in helping behavior could be attributed to barriers to help. However, due to the design of the study, the first barrier, "notice the event," could not be tested. An analogue study could be conducted to include this barrier in testing in order to see whether that specific barrier also has gender differences. Bennett et al. (2014) found that if participants were to notice an event as a pre-assault risk, they would be more likely to intervene. The present study found that overall rape myth acceptance was low and did not contribute to gender differences in bystander helping behavior, but could be linked to barriers to help. Further research could be conducted to examine this link and the role it plays in bystander intervention. For example, a correlational study could be conducted to see

which barriers are affected by rape myth acceptance. Other factors of bystander helping behavior should be researched. For example, do bystanders offer more or less help based on the race or age of the victim? When does a potentially ambiguous situation like the pre-assault risk condition become less ambiguous to potential bystanders? Researchers should focus on which situations promote bystander helping behavior in party rape situations. The current study as well as many past studies (Bennett et al., 2014; Levine et al., 2002) have looked at the relationship between the bystander and the victim in helping behavior. Burn (2009) found that men were likely to intervene when the perpetrator was a friend, but the research did not look at women bystander intervention with perpetrators. Further research can lead to the founding of better bystander education programs which, in turn, could lead to more intervention on behalf of individuals at risk for party rape within the community.

The present study has wide-reaching applications. Krebs et al. (2007) found that one in five college women are victims of sexual assault or attempted sexual assault. The current approach to preventing these crimes is the establishment of bystander intervention programs on college campuses. The current study explores some possible explanations that can be attributed to bystander helping behavior. Further research is necessary to fully understand situations that lead to bystander helping behavior.

## REFERENCES

- Armstrong, E. A., Hamilton, L., & Sweeney, B. (2006). Sexual assault on campus: A multilevel, integrative approach to party rape. *Social Problems*, 53(4), 483-499. doi:10.1525/sp.2006.53.4.483
- Banyard, V. L. (2008). Measurement and correlates of prosocial bystander behavior: The case of interpersonal violence. *Violence and Victims*, 23(1), 83-97. doi:10.1891/0886-6708.23.1.83

- Banyard, V. L., & Moynihan, M. M. (2011). Variation in bystander behavior related to sexual and intimate partner violence prevention: Correlates in a sample of college students. *Psychology of Violence, 1*(4), 287-301. doi:10.1037/a0023544
- Bennett, S., Banyard, V. M., & Garnhart, L. (2014). To act or not to act, that is the question? Barriers and facilitators of bystander intervention. *Journal of Interpersonal Violence, 29*(3), 476-496. doi:10.1177/0886260513505210
- Burn, S. M. (2009). A situational model of sexual assault prevention through bystander intervention. *Sex Roles, 60*, 779-792. doi:10.1007/s11199-008-9581-5
- Carlson, M. (2008). I'd rather go along and be considered a man: Masculinity and bystander intervention. *The Journal of Men's Studies, 16*(1), 3-17. doi:10.3149/jms.1601.3
- Chabot, H. F., Tracy, T. L., Manning, C. A., & Poisson, C. A. (2009). Sex, attribution, and severity influence intervention decisions of informal helpers in domestic violence. *Interpersonal Violence, 24*(10), 1696-1713. doi:10.1177/0886260509331514
- Eyssel, F., Bohner, G., & Siebler, F. (2006). Perceived rape myth acceptance of others predicts rape proclivity: Social norm or judgmental anchoring? *Swiss Journal of Psychology/Schweizerische Zeitschrift Für Psychologie/Revue Suisse De Psychologie, 65*(2), 93-99. doi:10.1024/1421-0185.65.2.93
- Fischer, P., Greitemeyer, T., Pollozek, F., & Frey, D. (2006). The unresponsive bystander: Are bystanders more responsive in dangerous emergencies? *European Journal of Social Psychology, 36*(2), 267-278. doi:10.1002/ejsp.297
- Hinck, S. S., & Thomas, R. W. (1999). Rape myth acceptance in college students: How far have we come? *Sex Roles, 40*(9), 815-832.
- Katz, J., Colbert, S., & Colangelo, L. (2015). Effects of group status and victim sex on female bystanders' responses to a potential party rape. *Violence and Victims, 30*(2), 265-278. doi:10.1891/0886-6708.VV-D-13-00099
- Koelsch, L. E., Brown, A. L., & Boisen, L. (2012). Bystander perceptions: Implications for university sexual assault prevention programs. *Violence and Victims, 27*(4), 563-79. doi:10.1891/0886-6708.27.4.563
- Krebs, C. P., Lindquist, C. H., Warner, T. D., Fisher, B. S., & Martin, S. L. (2007). *The campus sexual assault (CSA) study: Final Report*. Retrieved from <https://www.ncjrs.gov/pdffiles1/nij/grants/221153.pdf>
- Latane, B., & Darley, J. M. (1970). *The unresponsive bystander: Why doesn't he help?* New York, NY: Appleton-Century-Crofts.
- Levine, M., Cassidy, C., Brazier, G., & Reicher, S. (2002). Self-categorization and bystander non-intervention. *Journal of Applied Social Psychology, 32*(7), 1452-1463. doi:10.1111/j.1559-1816.2002.tb01446.x
- Levine, M., & Crowther, S. (2008). The responsive bystander: How social group membership and group size encourage as well as inhibit bystander intervention. *Journal of Personality and Social Psychology, 95*(6), 1429-1439. doi:10.1037/a0012634
- McMahon, S. (2010). Rape myth beliefs and bystander attitudes among incoming college students. *Journal of American College Health, 59*(1), 3-11. doi:10.1080/07448481.2010.483715
- Mohler-Kuo, M., Dowdall, G. W., Koss, M. P., & Wechsler, H. (2004). Correlates of rape while intoxicated in a national sample of college women. *Journal of Studies on Alcohol, 65*(1), 37-45. doi:10.15288/jsa.2004.65.37
- Muir, G., Lonsway, K. A., & Payne, D. L. (1996). Rape myth acceptance among Scottish and American students. *The Journal of Social Psychology, 136*(2), 261-262. doi:10.1080/00224545.1996.9714002



- Payne, D. L., Lonsway, K. A., & Fitzgerald, L. F. (1999). Rape myth acceptance: Exploration of its structure and its measurement using the Illinois rape myth acceptance scale. *Journal of Research in Personality*, 33(1), 27-68. doi:10.1006/jrpe.1998.2238
- Rozee, P. D., & Koss, M. P. (2001). Rape: A century of resistance. *Psychology of Women Quarterly*, 25(4), 295-311. doi:10.1111/1471-6402.00030
- Tice, D. M., & Baumeister, R. F. (1985). Masculinity inhibits helping in emergencies: Personality does predict the bystander effect. *Journal of Personality and Social Psychology*, 49(2), 420-428. doi:10.1037/0022-3514.49.2.420
- Turner, J. C., Hogg, M. A., Oakes, P. J., Reicher, S. D., & Wetherell, M. S. (1987). A self-categorization theory. *Rediscovering the social group: A self-categorization theory* (pp. 42-67). Oxford, UK: Basil Blackwell Ltd.